

STATE OF NEW HAMPSHIRE

for LOBBYISTS

RECEIVED

JUL 25 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

2017 Statement of Income and Expenses (RSA Chapter 15) PLEASE PRINT

I. Name of Lobbyist(s) _ Melinda Poore	<u> </u>		
II. Name of lobbyist'	s partnership, firm o	r corporation, if a	ny:	· · · · · · · · · · · · · · · · · · ·
Ch	arter Communicat	ions Inc		
	me of partnership, firm or			
110 Johnson Doo		75 (1 1		
118 Johnson Road Business Address: (St	reet)	Portland (Town/City)	ME (State)	04102
(6)	1001)	(Town/City)	(State)	(Zip Code)
(207) <u>253-2217</u>	()	e-mail <u>melin</u> e	da.poore@charter.com
(Telephone)		(Fax))	
III. This statement co	overs: (Choose one –	file separate repor	ts for each client, OR you	ı may file a separate report foi
reportable expense ti	ransactions which are	not attributable t	to any one client).	
X All reportable tran	sactions occurring in t	ho montho miss to	4h.	4 6 11 12 12
es mireportable trail	sactions occurring in t	ne months prior to	the reporting date relative t	to the following client:
	Charter Commu	nications, Inc.		
			bbyist Registration Form)	
<u>OR</u>				
 All reportable trans unrelated to any partic 	actions by the lobbyis ular client.	t (including the lob	byist's family), or the lobb	ying firm listed below which are
IV. Date of Report Reports cover: activ	April 26, 2017 ity from date of registrat	ion to 3/31/17	July 26, 2017 🗓 activity from 4/1/17 to 6/36	0/17
	October 25, 2017 [activity from 7/1/17 to 9.		January 31, 2018 activity from 10/1/17 to 12	
V. There have been If this box is checked, of Concord, NH 03301.	no fees received ar complete just this form	nd no reportable and submit it to th	transactions made sinc ne Secretary of State's Offic	ce the last report. See, State House, Room 204,
VI. Check if addition	al reports are attache	ed:		
☐ If you have receive	ed fees or made expen	ditures, you must fi	ile Addendum A– Fees and	d Expenses
	n honorarium or reimb			Report of Honorariums or
☐ If you, your firm,	or your family has mad	de political contribu	utions, you must file Adder	ndum C- Political Contribution
Sworn Statement/Aff	irmation by Lobbyist	ı		
	SA 15-B, RSA 14-C a	nd RSA 664 and he	ereby swear or affirm that t	he foregoing information is true
Helyod	en.		7/6/1	7
(Signature of lobbyist)		, , , , , , (Date)
Melinda Poore				
(Print Name of lobbyi	st)			